



North Carolina Department of Environment and Natural Resources
Division of Environmental Health

Beverly Eaves Perdue
Governor

Terry L. Pierce
Director

Dee Freeman
Secretary

January 3, 2011

MEMORANDUM

TO: Applicants for a New North Carolina Sleep Products Sanitizer's License

FROM: Charles M. Johnson
Head, Sleep Products Branch

SUBJECT: Application for a New North Carolina Sleep Products Sanitizer's License

Thank you for your interest in North Carolina. Attached is an application for the 2011 North Carolina Sleep Products Sanitizer's License. As a sanitizer, not registered in North Carolina during the previous year, you will be charged an estimated fee as a deposit. It is very important that you set up a method to track your sales immediately. At the end of the year, you will be sent a renewal application that will take you step-by-step through the calculation process to determine the actual fee. If the deposit was more than the actual fee, you will be eligible for a refund. Renewals are mailed in January of each year. We rarely know that an application did not reach the correct destination so it is the responsibility of the company to contact this office if applications do not arrive at the scheduled time. The deadline for renewing a license is not extended because the application was not received.

******All information requested on the application must be provided in full. Supporting documentation such as law labels must accompany your application. ****** Law labels must be in compliance with federal and state statutes and rules. Your federal identification number (FID) is required and is essential for processing refunds. Please include the area code for telephone and fax numbers. Verify all information and make any corrections before mailing. Check for legibility, correct spelling and proper addresses before signing the application. **It is mandatory that you list both addresses, the mailing address in the first address box and the physical plant location address in the second address box.** If they are the same, please indicate by writing the "SAME" in the second address box. Do not leave any blank spaces. A separate application must be completed for each plant, even when owned by the same company. We must have the name of the contact person who can answer questions about the application. The form is to be signed by the person of authority, who is responsible for validating accuracy of production and sales figures given on the application. The contact and chief financial officer do not have to be the same person. **Original signatures are required.** We cannot accept copies, faxes, or stamped signatures. Should the State so choose, an audit of your records by an independent CPA, certified in North Carolina, may be requested. In such situations, all expenses are the responsibility of the applicant.

Any incomplete information and/or lack of the original signatures will necessitate the return of the application. This will cause a delay in issuance of your license. Sanitization cannot be performed if the license has expired. Faxes or copies of applications **will not** be accepted.

If we can help in any way, please call Teresa Adams, (919) 571-4814.

Public Health Pest Management Section – Nolan H. Newton, Ph.D., Chief
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